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## International perspectives on social media guidance for nurses: a content analysis

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## International perspectives on social media guidance for nurses: a content analysis

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# Social media & the internet

- A large proportion of nurses and healthcare professionals now use Facebook and other social media sites – a reported 60-98% of healthcare professionals have presence on social media e.g. Facebook (*Garner & O'Sullivan, 2010; Ford, 2011; Hall et al, 2013; Mabvuure et al, 2014*)
- Facebook is the most commonly used social media site and poses a range of opportunities and risks, particularly for healthcare professionals

# Background & rationale

- There are professional guidelines on the use of social media RCN (2009) & NMC (2012) and most Universities and NHS trusts/employers also have policies
- Despite this there is still evidence to suggest that nurses do not adhere to online rules and this poses challenges to professional accountability

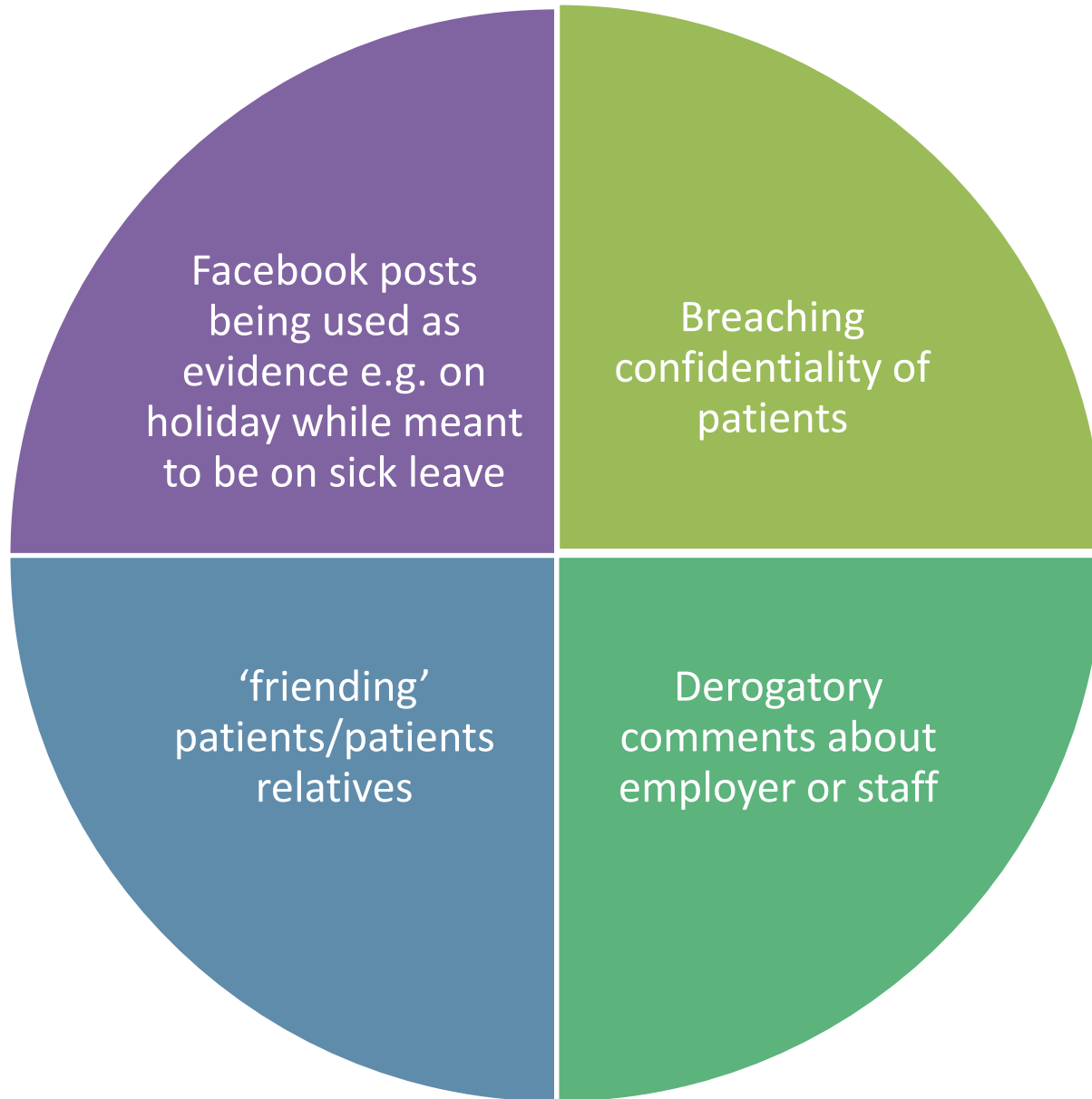
Ford (2011) identified:

75% of nurses had seen discussion of other members of staff on social media

32% had seen discussion of service users

12% had seen photography of patients/service users

A scoping search of NMC competency hearings/documents from 2010-14 showed 38 linked to Facebook in some way



# Aims & objectives

## **AIM:**

To analyse the content in professional guidance on use of social media for the nursing profession on an international level. This hoped to identify some good practice examples of content to inform the development of comprehensive guidance.

## **OBJECTIVES:**

- Conduct a scoping search of available professional body guidance on the use of social media
- Analyse the content using a thematic content analysis
- Identify common themes in content and synthesise these into recommended themes and content to be included in comprehensive professional guidance

# Methods – search strategy

- International council of nurses (ICN) members list was used to identify websites of relevant professional bodies
- These sites were then searched for keywords:
  - Social media +/- online
  - Social networks +/- online
  - Facebook
  - Internet



# Methods – search strategy

## Inclusion

- Must be professional organisation e.g. NMC, RCN
- Must be written in English
- Must be identified as a guidance document or policy

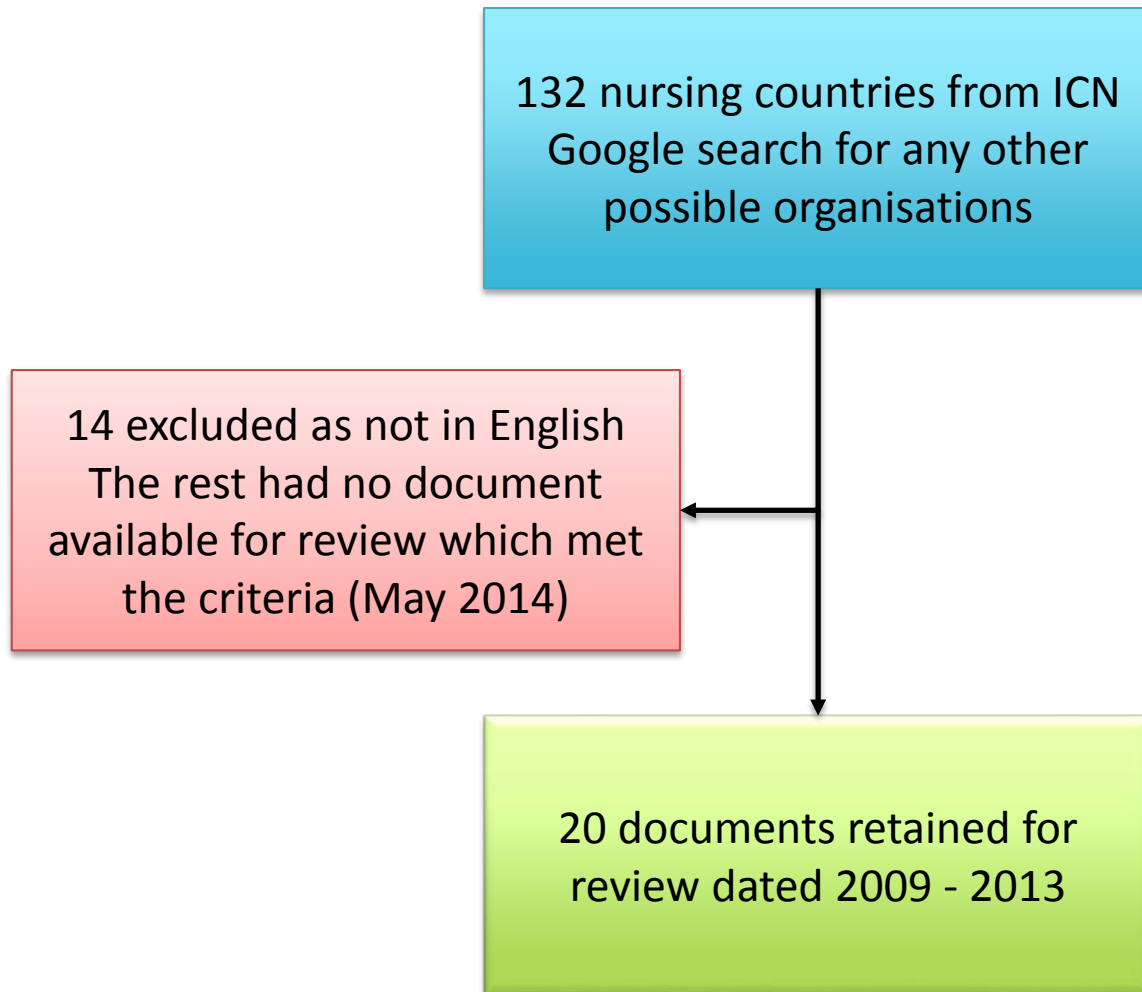
## Exclusion

- Educational policy e.g. university policy
- Health & social care organisation policy
- Employers policy
- General professional guidance rather than social media specific

# Methods – thematic content analysis

- The RCN (2009), NMC (2012) & New Zealand Nurses Organisation (2012) were the first pieces identified and these were read through first to identify possible common themes for the coding table
- The rest of the documents were read through, highlighted key themes under the coding headings identified
- The tabulated results enabled comparison of content across all documents
- Then returned to the original documents to identify recommendations for content and possible format

# Results – Identified publications



# Results - Themes

| Number | Advice Theme                      |
|--------|-----------------------------------|
| 8      | Definition of SM                  |
| 12     | Confidentiality & Privacy         |
| 5      | Impact on team/colleagues         |
| 3      | Impact on employer/organisation   |
| 5      | Impact on professional reputation |
| 4      | Impact on patient care            |
| 8      | Pers-prof boundaries - patients   |
| 3      | Pers-prof boundaries - colleagues |
| 4      | Bullying/harassment               |
| 3      | Myths/misconceptions/pitfalls     |
| 9      | Benefits /Opportunities           |
| 19     | Tips & advice                     |
| 4      | Roles & resp. - employer          |
| 6      | Roles & resp./accountability - RN |
| 2      | Roles & resp. - education         |
| 6      | Student nurses                    |

# Results

- 6 documents originating from New Zealand, Ireland & Canada used case study examples to help application of guidance
- The majority focused on generic tips/advice, Do's & Don'ts rather than illustrating the potential consequences
- There needs to be more emphasis on the concept of professional accountability & what this means in the context of social media
- There are some areas which are explicit e.g. confidentiality but less focus on what is unacceptable rather than unprofessional which could lead to confusion
- There is little information for:
  - Education/academics training pre-registration nurses
  - Pre-registration nurses who are new to the profession

# Main limitations

- Only included publications in written English
- Only included those available through the internet/electronically
- One person conducted analysis and best practice would likely have seen two
- Not all countries had information available so this data may present several guidance documents from one country e.g. USA

# Conclusion & Recommendations

- Guidance should use practical examples to illustrate the expected actions/behaviours of the professional in the online environment
- There should be emphasis on professional accountability outside of the clinical environment & on the consequences of misuse/naïve use of social media
- More information should be available on how to educate those new to the profession
- Comprehensive guidance covers a wide range of themes and not just 'do's & don'ts'
- There should also be examples of 'best practice' use and 'successful' use to illustrate the benefits and opportunities of social media
- Further research into the awareness and impact of professional guidance and the most effective methods of enhancing understanding may be required

# Further work being conducted

- Basic analysis of NMC competence hearings
  - Length of time qualified
  - Patterns and instances over time
  - The reasons Facebook was included
- Systematic review of literature on healthcare professional use of Facebook
- Critical realist ethnography on the relationship between Facebook and professional accountability



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# Questions?

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